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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | Part 1: Identify Yourself | | | | | | | | |
|-----|--|---|---|---|--|--|--|--|--|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): | | | | | |
| 1. | Your full name | | | | | | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | William First name Wyatt Middle name Hendrickson Last name and Suffix (Sr., Jr., II, III) | _ | Linda First name Lee Middle name Hendrickson Last name and Suffix (Sr., Jr., II, III) | | | | | |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | Bill Hendrickson | | Lin Hendrickson | | | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1091 | | xxx-xx-8047 | | | | | |

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson

Case number (if known)

| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) | | | |
| Where you live | 401 Wagonwood Court | If Debtor 2 lives at a different address: | | | |
| | Round Lake, IL 60073 Number, Street, City, State & ZIP Code Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name or EINs. Business name(s) Business name or EINs. Business name or Eins. | | | |

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| | btor 1 William Wyatt btor 2 Linda Lee Hen | | n | Document | —— | Case number (if known) | | |
|-----|---|-------------------|---|---|---|--|----|--|
| Par | rt 2: Tell the Court Abo | out Your Bank | kruntev C | 250 | | | | |
| 7. | The chapter of the Bankruptcy Code you | | | | | | | |
| | choosing to file under | | oter 7 | | | | | |
| | | ☐ Chap | | | | | | |
| | | ☐ Chap | | | | | | |
| | | ☐ Chap | | | | | | |
| 8. | How you will pay the f | ab ore a p | out how your der. If your ore-printed | ou may pay. Typically, if yo attorney is submitting you address. | u are paying the fee y r payment on your be | eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or mone half, your attorney may pay with a credit card or check with | y | |
| | | □ In | leed to pa ne Filina Fe | y the fee in installments. ee in Installments (Official F | If you choose this opt Form 103A). | ion, sign and attach the Application for Individuals to Pay | | |
| | | ☐ Ire bu ap | equest that it is not recopplies to yo | at my fee be waived (You quired to, waive your fee, an ur family size and you are | may request this option and may do so only if y unable to pay the fee | on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line the in installments). If you choose this option, you must fill out iricial Form 103B) and file it with your petition. | at | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | _ | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy cases pending or bein | ■ No | | | | | | |
| | filed by a spouse who not filing this case wit you, or by a business partner, or by an affiliate? | is Yes. | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | _ | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ No. | Go to | line 12. | | | | |
| | residence? | ☐ Yes. | Has y | our landlord obtained an ev | riction judgment again | st you and do you want to stay in your residence? | | |
| | | | | No. Go to line 12. | | | | |
| | | | П | Yes. Fill out Initial Statem | ent About an Eviction | Judgment Against You (Form 101A) and file it with this | | |

bankruptcy petition.

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| Deb | otor 2 Linda Lee Hendrid | ckson | | | Case number (if known) | | |
|-----|---|---|----------------|--------------------------------------|---|--|--|
| | | | | | | | |
| Par | Report About Any Bu | ısinesses | You Own | as a Sole Proprie | tor | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | |
| | | ☐ Yes. | Name | and location of bus | siness | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | te & ZIP Code | | |
| | it to this petition. | | Chec | k the appropriate bo | ox to describe your business: | | |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) | | |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) | | |
| | | | | Stockbroker (as d | efined in 11 U.S.C. § 101(53A)) | | |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) | | |
| | | | | None of the above | 9 | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can sideadlines. If you indicate that you are a small business debtor, you must attach your most recent balance shee operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B). | | | | | |
| | For a definition of small | ■ No. | I am r | ot filing under Chap | oter 11. | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am f Code | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | |
| | | ☐ Yes. | I am f | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | us Property or An | y Property That Needs Immediate Attention | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat | □ Yes. | | | | | |
| | of imminent and identifiable hazard to | □ res. | What is | the hazard? | | | |
| | public health or safety? | | | | | | |
| | Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code | | |
| | | | | | Tallians, States, Only, State & Elp South | | |

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-34719 Doc 1 Filed 10/31/16 Entered 10/31/16 14:03:55 Desc Main Document Page 6 of 65

William Wyatt Hendrickson Debtor 1 Debtor 2 Linda Lee Hendrickson Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts ☐ No. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will be available for Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you □ 5001-10.000 **50.001-100.000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ William Wyatt Hendrickson /s/ Linda Lee Hendrickson William Wyatt Hendrickson Linda Lee Hendrickson Signature of Debtor 1 Signature of Debtor 2 Executed on October 31, 2016 Executed on October 31, 2016 MM / DD / YYYY MM / DD / YYYY

| Debtor 1 Debtor 2 | William Wyatt Her Linda Lee Hendrid | | Document | Page 7 of 65 | | number (if known) |
|----------------------|--|--|---|--|----------------------|--|
| | | | | | | |
| • | attorney, if you are ed by one | under Chapter 7, 11, 12, for which the person is e | or 13 of title 11, Unite ligible. I also certify t | ed States Code, and hat I have delivered | have ex to the de | nformed the debtor(s) about eligibility to proceed splained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b) |
| • | not represented by ey, you do not need page. | and, in a case in which § schedules filed with the p | ` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | , certify that I have n | o knowl | edge after an inquiry that the information in the |
| | | /s/ Robert Tomei Signature of Attorney for | Debtor | Da | ate | October 31, 2016 MM / DD / YYYY |

Email address

Robert Tomei
Printed name
Tomei Law
Firm name

Gurnee, IL 60031

Number, Street, City, State & ZIP Code

6310339Bar number & State

223 N Milwaukee Ave., Ste. 14

Contact phone **847-596-7494**

robert@tomeilawfirm.com

| | | 1700.11111 | eni Paue o Di Oo | |
|---|-------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | William Wyatt He | ndrickson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Linda Lee Hendri | ckson | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|----|--|-------------|----------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 193,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 258,335.26 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 451,335.26 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | i abilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 308,132.54 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 200.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 9,204.05 |
| | Your total liabilities | \$ | 317,536.59 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,838.76 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 5,895.00 |
| Pa | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson Case number (if known)

3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 9,497.93

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|--------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 200.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 200.00 |

| | Ca | se 16-34719 | Doc 1 | Filed 10/31 Documen | | Entered 10/31/1 | 6 14:03:55 | Desc | Main | |
|------------------------------|--|---|-----------------------------|---------------------------------------|--|--|---|--|---------------------------------------|--|
| Fill | in this inforn | nation to identify | your case and th | | | | | | | |
| Deb | tor 1 | William Wyat | tt Hendrickson | | | | | | | |
| Dab | t 0 | First Name | | e Name | L | ast Name | | | | |
| | tor 2 use, if filing) | First Name | | e Name | L | ast Name | | | | |
| Unit | ed States Bar | nkruptcy Court for | the: NORTHER | N DISTRICT OF | F ILLINC | DIS | | | | |
| | e number | | | | | | | _ | | |
| Cas | | | | | | | | | Check if this is an amended filing | |
| SC n eac hink nfori | chedule ch category, se it fits best. Be | e as complete and a space is needed, a | coperty escribe items. List | le. If two married p | people a | asset fits in more than one re filing together, both are op of any additional pages | equally responsible | e for supply | ying correct | |
| Part | 1: Describe I | Each Residence, Bu | ilding, Land, or Ot | her Real Estate Yo | ou Own | or Have an Interest In | | | | |
| | No. Go to Part | _ | | What is the pr | roperty? | Check all that apply | | | | |
| | 401 N Wag | onwood Court | | | | | | ured claims | or exemptions. Put | |
| | Street address, if available, or other description | | | | | | | ount of any secured claims on Schedule D: rs Who Have Claims Secured by Property. | | |
| | _ | | | ☐ Manufac | actured or | mobile home | Current value of | the C | urrent value of the | |
| | Round Lal | Ke IL State | ZIP Code | ☐ Land | | and a | entire property? \$193,000 | • | ortion you own? \$193,000.00 | |
| | City | State | ZIF Code | ☐ Timesha | nent prope nare | erty | | | ownership interest | |
| | | | | Other | | | | ole, tenanc | y by the entireties, or | |
| | | | | Who has an in | | the property? Check one | Joint tenant | iowii. | | |
| | Lake | | | ☐ Debtor 2 | , | | | | | |
| | County | | | ☐ At least | t one of th | btor 2 only the debtors and another wish to add about this iter number: | (see instructions | is commu | nity property | |
| | | | | Hearing to \$127,401.00 Defense co | confirm 0 sale a ounsel n order | erty - Foreclosure jud m sale scheduled for amount on auction sa for Debtors are chall voiding the sale. If co e ordered. | hearing on 11/ ale dated 5/24/1 enging validity | 18/2016 f 6. Forec of sale, | for losure and are | |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$193,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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| Debto | | nda Lee Hendrickson | Case number (if known) | | | |
|--------------|---|--|---|---|-------------------------|--|
| 3. Ca | rs, vans, | trucks, tractors, sport utility ve | ehicles, motorcycles | | | |
| | No | | | | | |
| ■ \ | res . | | | | | |
| 3.1 | Make: | Dodge | Who has an interest in the property? Check one | Do not deduct secured cl | | |
| | Model: | Stratus SXT 4D | ■ Debtor 1 only | the amount of any secure Creditors Who Have Clair | | |
| | Year: | 2004 | Debtor 2 only | Current value of the | Current value of the | |
| | Approxim | nate mileage: 145,000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | Other info | ormation: | \square At least one of the debtors and another | | | |
| | | e Condition - needs 4 | _ | £4 000 00 | £4 000 00 | |
| | new tir | es, front end alignment | ☐ Check if this is community property (see instructions) | \$1,300.00 | \$1,300.00 | |
| 3.2 | Make: | Dodge Avenger SXT 4D | Who has an interest in the property? Check one Debtor 1 only | Do not deduct secured cl the amount of any secure Creditors Who Have Clai | d claims on Schedule D: | |
| | Year: | 2008 | Debtor 2 only | Current value of the | Current value of the | |
| | Approximate mileage: 130,000 Other information: | | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | | | ☐ At least one of the debtors and another | | | |
| | Averag | e Condition | Check if this is community property (see instructions) | \$3,050.00 | \$3,050.00 | |
| 3.3 | Make: | Buick | Who has an interest in the property? Check one | Do not deduct secured cl | | |
| | Model: | Lucerine CX Sedan 4D | Debtor 1 only | the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Proper | | |
| | Year: | 2006 | ☐ Debtor 2 only | Current value of the | Current value of the | |
| | Approxim | nate mileage: 181,000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | Other info | ormation: | ☐ At least one of the debtors and another | | | |
| | end ali | ondition - needs front gnment, breaks, tires, steering fluid | Check if this is community property (see instructions) | \$1,500.00 | \$1,500.00 | |
| 3.4 | Make: | Park Model | Who has an interest in the property? Check one | Do not deduct secured cl the amount of any secure | d claims on Schedule D: | |
| | Model: | | Debtor 1 only | Creditors Who Have Clair | ms Secured by Property. | |
| | Year: | 1992 | Debtor 2 only | Current value of the | Current value of the | |
| | | nate mileage: | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | Other information: 30 x 12 ft "mobile" home. 1 | | \square At least one of the debtors and another | | | |
| | | | | \$3,000.00 | \$3,000.00 | |
| | | m, living room, kitchen, om, fair condition - needs | Check if this is community property (see instructions) | | Ψ3,000.00 | |
| | | rpeting, windows, roof is | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | | condition. Chain of | | | | |
| | | rental spot. | | | | |

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| Debt | | inda Lee Hendrickson | C | ase number (if known) | |
|--------------|---|--|--|-------------------------|--|
| | | | nd other recreational vehicles, other vehicles, an atercraft, fishing vessels, snowmobiles, motorcycle | | |
| | No | | | | |
| | Yes | | | | |
| 4.1 | Make: | Sunesta Boat | Who has an interest in the property? Check one | | |
| 7.1 | wake. | - | _ | | ured claims or exemptions. Put secured claims on Schedule D: |
| | Model: | Chaparral 233/DB | Debtor 1 only | Creditors Who Hav | e Claims Secured by Property. |
| | Year: | 1999 | Debtor 2 only | Current value of the | |
| | Other inf | ormation: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | | ☐ At least one of the debtors and another☐ Check if this is community property | \$10,560.0 | 90 \$10,560.00 |
| | Averaç | ge Retail Value Per NADA | (see instructions) | | |
| .pa | ages you B: Descri | have attached for Part 2. Write be Your Personal and Household It | | | \$19,410.00 |
| Do y | ou own c | or have any legal or equitable in | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Yes. De | scribe Household: Co | uch table beds chairs dresser kitchenware | • | \$700.00 |
| E: | | Televisions and radios; audio, vid including cell phones, cameras, r | eo, stereo, and digital equipment; computers, print nedia players, games | ers, scanners; music co | ollections; electronic devices |
| | | Electronics: 40 | " 12 year old TV | | \$250.00 |
| 9. Eq | No Yes. De uipment xamples: | other collections, memorabilia, co scribe for sports and hobbies Sports, photographic, exercise, and musical instruments | prints, or other artwork; books, pictures, or other a bllectibles nd other hobby equipment; bicycles, pool tables, go | | |
| | irearms E <i>xamples</i> No Yes. De | : Pistols, rifles, shotguns, ammun | ition, and related equipment | | |
| | lothes Examples No Yes. De | | oats, designer wear, shoes, accessories | | |

Official Form 106A/B Schedule A/B: Property page 3

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| Debtor 1 William Wya Linda Lee H | att Hendrickson Iendrickson | Case number (if known | 1) |
|---|--|---|---|
| | Clothes: Normal clothing | for one adult male and one adult female | \$500.00 |
| 12. Jewelry Examples: Everyday je □ No ■ Yes. Describe | ewelry, costume jewelry, engager | ment rings, wedding rings, heirloom jewelry, watches, gems | , gold, silver |
| | Jewelry: Costume jewelr | у | \$50.00 |
| 13. Non-farm animals Examples: Dogs, cats, □ No ■ Yes. Describe | birds, horses | | |
| | Animals: Fish, dog, cat | | \$75.00 |
| | of all of your entries from Part number here | : 3, including any entries for pages you have attached | \$1,575.00 |
| | legal or equitable interest in ar | ny of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash Examples: Money you ■ No □ Yes | have in your wallet, in your home | e, in a safe deposit box, and on hand when you file your pet | ition |
| institutions | savings, or other financial accoun . If you have multiple accounts wi | nts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each. | e houses, and other similar |
| □ No ■ Yes | | Institution name: | |
| | 17.1. Checking | Checking Account: TCF Ending in 6422 | \$9,482.00 |
| | 17.2. Checking | Checking Account: TCF Ending in 0050 | \$15.00 |
| | | | |

Official Form 106A/B Schedule A/B: Property page 4

in 8525

Savings Account: NorStates Account Ending

17.3. Savings

\$112.00

Filed 10/31/16 Entered 10/31/16 14:03:55 Page 14 of 65 Document William Wyatt Hendrickson Debtor 1 Linda Lee Hendrickson Debtor 2 Case number (if known) 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: Yes..... UPS Class A Common Stock Account No. Ending in 8674. Total 55.491 shares valued at \$107.16/share as of October 27, 2016, 18.8173 Vested Shares, 36.6737 Restricted Shares (first 5.8093 shares vest on or about March 31, 2017, final 6.3528 shares vest on or about September 30, 2018). 18.8173 Vested Shares x \$107.16 = \$2,016.46 (Current Valuation of \$2.016.46 all vested stock) 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: 401(k) Prudential 401(k) \$213,000.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Case 16-34719

Doc 1

Desc Main

Case 16-34719 Doc 1 Filed 10/31/16 Entered 10/31/16 14:03:55 Desc Main Page 15 of 65 Document William Wyatt Hendrickson Debtor 1 Debtor 2 Linda Lee Hendrickson Case number (if known) ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: State Farm Universal Life Insurance William Hendrickson, Policy, Principal Insured: Linda **Child Successor** Hendrickson, Policy No. Ending in Beneficiary \$0.00 6620. Benefit Amount \$75.000.00. State Farm Whole Life Insurance Policy. Principal Insured: William Hendrickson, Policy No. Ending in Linda Hendrickson, 2119; Cash Value indicated as of **Child Successor** anniversary date of April 2016, Benefit Amount \$20,000.00. **Beneficiary** \$5,866.20 State Farm Whole Life Insurance Policy. Principal Insured: William Hendrickson, Policy No. Ending in Linda Hendrickson, 6223. Cash Value indicated as of anniversary date of April 2016, Benefit **Child Successory Beneficiary** \$6.858.60 Amount \$20,000.00. State Farm Term Life Insurance Policy. Linda Hendrickson. Principal Insured: William Hendrickson, Child successory Policy No. Ending in 2063, Benefit **Beneficiary** \$0.00 Amount \$100,000.00.

Official Form 106A/B Schedule A/B: Property page 6

Term Life Policy through work (UPS)

Linda Hendrickson

(Debtor 2)

\$0.00

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|-----------------------|--|-----------------|-----------------------------|--|-----------------------|
| Debtor 1 Debtor 2 | William Wyatt Hendri Linda Lee Hendricks | | Boodinent | Case number (if known) | |
| If you somed | terest in property that is care the beneficiary of a livinone has died. Give specific information | | | ed surance policy, or are currently entitled to rec | eive property because |
| <i>Exam</i> µ □ No | s against third parties, who ples: Accidents, employmen Describe each claim | nt disputes, in | | it or made a demand for payment s to sue | |
| | | and or | | n claim against "Adminacase LLC" I to foreclosure defense. Payments o. | Unknown |
| ■ No | contingent and unliquidat Describe each claim | | every nature, includin | g counterclaims of the debtor and rights to | o set off claims |
| ■ No | nancial assets you did not Give specific information | t already list | | | |
| | | | | ny entries for pages you have attached | \$237,350.26 |
| Part 5: De | escribe Any Business-Related | Property You | Own or Have an Interest | In. List any real estate in Part 1. | |
| No. Go | own or have any legal or equ i o to Part 6. Go to line 38. | itable interest | in any business-related p | roperty? | |
| | escribe Any Farm- and Commo | | | n or Have an Interest In. | |
| ■ No. | u own or have any legal or Go to Part 7. s. Go to line 47. | r equitable ii | nterest in any farm- or o | commercial fishing-related property? | |
| Part 7: | Describe All Property You | Own or Have | an Interest in That You Dic | l Not List Above | |
| | u have other property of a ples: Season tickets, countr | | | | |
| | Give specific information | | | | |

Official Form 106A/B Schedule A/B: Property page 7

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 William Wyatt Hendrickson Document Page 17 of 65

63. Total of all property on Schedule A/B. Add line 55 + line 62

Linda Lee Hendrickson Debtor 2 Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$193,000.00 56. Part 2: Total vehicles, line 5 \$19,410.00 Part 3: Total personal and household items, line 15 \$1,575.00 57. Part 4: Total financial assets, line 36 58. \$237,350.26 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$258,335.26 \$258,335.26

Official Form 106A/B Schedule A/B: Property page 8

\$451,335.26

| | | 17(7(.1111)) | | |
|---------------------|-------------------------|-------------------|-------------|--|
| Fill in this inform | nation to identify your | case: | | |
| Debtor 1 | William Wyatt He | ndrickson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Linda Lee Hendri | ckson | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Ex |
|---|
|---|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property | portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|---|-------------------------------------|-----------------------------------|--|------------------------------------|--|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | |
| 401 N Wagonwood Court Round Lake, IL 60073 Lake County Residential Property - Foreclosure judgment entered February 17, 2016. Hearing to confirm sale scheduled for hearing on 11/18/2016 for \$127,401.00 sale amount on auction sale dated 5/24/16. Foreclosu Line from Schedule A/B: 1.1 | \$193,000.00 | | \$30,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-901 | |
| 2004 Dodge Stratus SXT 4D 145,000 miles | \$1,300.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| Average Condition - needs 4 new tires, front end alignment Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 2008 Dodge Avenger SXT 4D 130,000 miles | \$3,050.00 | | \$5.00 | 735 ILCS 5/12-1001(b) | |
| Average Condition Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | | |

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William Wyatt Hendrickson Debtor 1 Linda Lee Hendrickson Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2006 Buick Lucerine CX Sedan 4D 735 ILCS 5/12-1001(c) \$1,500.00 \$2,400.00 181.000 miles Poor Condition - needs front end 100% of fair market value, up to alignment, breaks, tires, leaking any applicable statutory limit steering fluid Line from Schedule A/B: 3.3 1999 Sunesta Boat Chaparral 233/DB 625 ILCS 45/3A-7(d) \$10.000.00 \$10,560.00 Average Retail Value Per NADA Line from Schedule A/B: 4.1 100% of fair market value, up to any applicable statutory limit Clothes: Normal clothing for one 735 ILCS 5/12-1001(a) \$500.00 \$500.00 adult male and one adult female Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Checking: Checking Account: TCF** 735 ILCS 5/12-1001(b) \$7,995.00 \$9,482.00 Ending in 6422 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): Prudential 401(k) 735 ILCS 5/12-1006 \$213,000.00 \$213,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit State Farm Universal Life Insurance 735 ILCS 5/12-1001(f) \$75,000.00 \$0.00 Policy. Principal Insured: Linda Hendrickson, Policy No. Ending in 100% of fair market value, up to 6620, Benefit Amount \$75,000.00. any applicable statutory limit Beneficiary: William Hendrickson. **Child Successor Beneficiary** Line from Schedule A/B: 31.1 State Farm Whole Life Insurance 735 ILCS 5/12-1001(f) \$5,866.20 \$25,866.20 Policy. Principal Insured: William Hendrickson, Policy No. Ending in 100% of fair market value, up to 2119; Cash Value indicated as of any applicable statutory limit anniversary date of April 2016, Benefit Amount \$20,000.00. Beneficiary: Linda Hendrickson, **Child Successor Beneficiary** Line from Schedule A/B: 31.2 State Farm Whole Life Insurance 735 ILCS 5/12-1001(f) \$6,858.60 \$26,858.60 Policy. Principal Insured: William Hendrickson, Policy No. Ending in 100% of fair market value, up to 6223. Cash Value indicated as of any applicable statutory limit anniversary date of April 2016, Benefit Amount \$20,000.00. Beneficiary: Linda Hendrickson, **Child Successory Beneficiary**

Line from Schedule A/B: 31.3

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Linda Lee Hendrickson Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B State Farm Term Life Insurance 735 ILCS 5/12-1001(f) \$0.00 \$100,000.00 Policy. Principal Insured: William Hendrickson, Policy No. Ending in 100% of fair market value, up to 2063, Benefit Amount \$100,000.00. any applicable statutory limit Beneficiary: Linda Hendrickson, **Child successory Beneficiary** Line from Schedule A/B: 31.4 Term Life Policy through work (UPS) 215 ILCS 5/238 \$0.00 \$100,000.00 Beneficiary: Linda Hendrickson (Debtor 2) 100% of fair market value, up to Line from Schedule A/B: 31.5 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1

| | | Document Page 2 | 21 of 65 | <u> </u> | |
|---------------------------------------|---|--|--|--|--------------------------------|
| Fill in this inform | nation to identify you | r case: | | | |
| Debtor 1 | William Wyatt H | endrickson | | | |
| | First Name | Middle Name Last Name | | | |
| Debtor 2 (Spouse if, filing) | Linda Lee Hend First Name | rickson Middle Name Last Name | | | |
| | | | | | |
| United States Bar | hkruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | | |
| Case number(if known) | | | | | if this is an |
| ~ | | | | | · · |
| Official Form | | | | | |
| Schedule | D: Creditors | Who Have Claims Secure | ed by Propert | У | 12/15 |
| | | f two married people are filing together, both are out, number the entries, and attach it to this form. | | | |
| 1. Do any creditors | have claims secured by | your property? | | | |
| ☐ No. Check | this box and submit the | nis form to the court with your other schedules. | You have nothing else to | o report on this form. | |
| Yes. Fill in | all of the information | pelow. | | | |
| Part 1: List All | Secured Claims | | | | |
| | | nore than one secured claim, list the creditor separate | | Column B | Column C |
| much as possible, lis | st the claims in alphabetion | a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. | Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Bank Of A Creditor's Name | | Describe the property that secures the claim: 401 N Wagonwood Court Round | \$294,051.54 | \$193,000.00 | \$101,051.54 |
| Nc4-105-0 Po Box 26 Greensbo | - | Lake, IL 60073 Lake County Residential Property - Foreclosure judgment entered February 17, 2016. Hearing to confirm sale scheduled for hearing on 11/18/2016 for \$127,401.00 sale amount on auction sale dated 5/ As of the date you file, the claim is: Check all that apply. □ Contingent | | | |
| Number, Street, | City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the del | ht? Chaak ana | Disputed | | | |
| Debtor 1 only Debtor 2 only | bt? Check one. | Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) | secured | | |
| ■ Debtor 1 and De | btor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| | e debtors and another | ☐ Judgment lien from a lawsuit | | | |
| Check if this cla community del | | Other (including a right to offset) | | | |
| Date debt was incu | Opened 4/30/97 Last Active 8/31/09 | Last 4 digits of account number 554 | <u> </u> | | |
| 2.2 Consumer | Portfolio Svc | Describe the property that secures the claim: | \$4,308.00 | \$3,050.00 | \$1,258.00 |
| Creditor's Name Attn: Bank 19500 Jam | kruptcy | 2008 Dodge Avenger SXT 4D 130,000 miles Average Condition As of the date you file, the claim is: Check all that | ψ+,300.00 | φ3,030.00 | ψ1,230.00 |
| Irvine, CA | | apply. | | | |

Who owes the debt? Check one.

Number, Street, City, State & Zip Code

☐ Unliquidated ☐ Disputed

Nature of lien. Check all that apply.

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| Debto | or 1 William W | yatt Hendricks | son | Cas | e number (if know) | | |
|---------------|--|--|---|---|------------------------------|-----------------------------|----------|
| | First Name | Middle Na | me Last Name | _ | - | | |
| Debto | or 2 Linda Lee First Name | Hendrickson Middle Na | nme Last Name | _ | | | |
| | First Name | Middle Na | ime Last Name | | | | |
| | btor 1 only btor 2 only | | ☐ An agreement you made (such as car loan) | mortgage or secured | i | | |
| _ | btor 1 and Debtor 2 | only! | ☐ Statutory lien (such as tax lien, me | echanic's lien) | | | |
| | least one of the deb | • | ☐ Judgment lien from a lawsuit | , | | | |
| | eck if this claim re ommunity debt | elates to a | ■ Other (including a right to offset) | Purchase Mon | ney Security | | |
| Date o | lebt was incurred | Opened 09/14 Last Active 9/30/16 | Last 4 digits of account num | nber 4996 | | | |
| 22 | Kovbank NA | | Describe the property that secures | the claim: | \$0.772.00 | \$10 560 00 | \$0.00 |
| $\overline{}$ | Keybank NA Creditor's Name | | 1999 Sunesta Boat Chaparr | | \$9,773.00 | \$10,560.00 | \$0.00 |
| | A 11 D | . D | 233/DB | ai | | | |
| | Attn: Recovery Processing | y Payment | Average Retail Value Per N | ADA | | | |
| | 4910 Tiedema | n Road | As of the date you file, the claim is: apply. | Check all that | | | |
| | Brooklyn, OH | 44144 | ☐ Contingent | | | | |
| | Number, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | |
| | | | ☐ Disputed | | | | |
| Who | owes the debt? C | heck one. | Nature of lien. Check all that apply. | | | | |
| | btor 1 only | | An agreement you made (such as car loan) | mortgage or secured | d | | |
| | btor 2 only | | _ | | | | |
| | btor 1 and Debtor 2 | • | Statutory lien (such as tax lien, me | echanic's lien) | | | |
| _ | least one of the deb | | Judgment lien from a lawsuit | Purchase Mon | nev Security | | |
| | mmunity debt | siates to a | Other (including a right to offset) | T di Gildoo ilion | icy Coounty | | |
| | | 0 | | | | | |
| | | Opened 04/99 Last | | | | | |
| | | Active | | | | | |
| Date o | lebt was incurred | 2/24/14 | Last 4 digits of account num | nber 2732 | | | |
| | | | | | | | |
| | | | | | 4 | | |
| | | - | olumn A on this page. Write that nun the dollar value totals from all pages | | \$308,132.54 | - | |
| | e that number her | | ine donar value totals from an pages | • | \$308,132.54 | 4 | |
| Part 2 | List Others t | o Be Notified for | r a Debt That You Already Listed | 4 | | | |
| Use th | nis page only if you to collect from yo | u have others to be u for a debt you ov | e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the additions | a debt that you alre in Part 1, and then I | list the collection agenc | y here. Similarly, if you h | ave more |
| debts | in Part 1, do not fi | Il out or submit thi | is page. | | | | |
| | | treet, City, State & Z 9th Judicial Ci | | On which lin | ne in Part 1 did you enter t | he creditor? 2.1 | |
| | Chancery Div | ision | | Last 4 digits | of account number241 | 19 | |
| | 18 N County S | | | | | | |
| | Waukegan, IL | 60085 | | | | | |
| | | | | | | | |
| | | treet, City, State & Z | Zip Code | On which lin | ne in Part 1 did you enter t | he creditor? 2.1 | |
| | Lake County 3 | | | l ast 4 digits | of account number | | |
| | Waukegan, IL | | | _ast raight | | | |

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| Debtor | 1 William Wya | tt Hendrickson | | Case number (if know) | | |
|---|--|-----------------------|---|---|--|--|
| | First Name | Middle Name | Last Name | | | |
| Debtor | 2 Linda Lee He | endrickson | | | | |
| | First Name | Middle Name | Last Name | - | | |
| Name, Number, Street, City, State & Zip Code Marc D. Engel Codilis & Associates, P.C. 15W030 North Frontage Rd, Ste. 100 Burr Ridge, IL 60527 | | | On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number 2419 | | | |
| F J 2 | lame, Number, Stree Patrick Schuetto Jutla & Dovitz, F 25 N. County St Vaukegan, IL 60 | P.C. reet, Ste. 2R | | On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number 2419 | | |

| | | Document | Page | 24 of | 65 | _ | | |
|--|---|--|--|------------------------------|---|----------------------------------|-----------------------------|---------------------------------|
| Fill in this inform | mation to identify your c | ase: | | | | | | |
| Debtor 1 | William Wyatt Hen | drickson | | | | | | |
| | First Name | Middle Name | Last Nam | е | | | | |
| Debtor 2 | Linda Lee Hendric | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Nam | e | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF I | LLINOIS | | | | | |
| Case number | | | | | | | | |
| (if known) | | | | | | | Check if | this is an |
| | | | | | | | amende | d filing |
| Official Forr | m 106E/E | | | | | | | |
| | _ | ho Have Unsecured | d Claim | e | | | | 12/15 |
| | | Part 1 for creditors with PRIOR | | | or creditors with NO | NPRIORITY | claime I is | |
| Schedule G: Execu Schedule D: Credit | utory Contracts and Unexpir tors Who Have Claims Secu ntinuation Page to this page | hat could result in a claim. Also red Leases (Official Form 106G). red by Property. If more space is a lf you have no information to r | . Do not inclus needed, co | ude any cre py the Par | editors with partially t you need, fill it out | secured cla , number the | ims that are entries in | e listed in the boxes on the |
| Part 1: List A | All of Your PRIORITY Uns | secured Claims | | | | | | |
| 1. Do any credite | ors have priority unsecured | claims against you? | | | | | | |
| ☐ No. Go to F | Part 2. | | | | | | | |
| Yes. | | | | | | | | |
| identify what ty possible, list th Part 1. If more | /pe of claim it is. If a claim has ne claims in alphabetical order than one creditor holds a part | . If a creditor has more than one present priority and nonpriority amour according to the creditor's name. ticular claim, list the other creditors et the instructions for this form in the creditors. | unts, list that of the list in Part 3. | claim here a nore than tw | and show both priority vo priority unsecured o | and nonprior claims, fill out | ity amounts. the Continu | . As much as uation Page of |
| | | | | | Total claim | Priority amount | | Nonpriority amount |
| | redit Corporation | Last 4 digits of acco | ount number | 9076 | \$200.00 | <u> </u> | \$0.00 | \$200.00 |
| | reditor's Name 4th Street | When was the debt i | incurred? | 1/20/20 | 16 | | | |
| PO Box | | mon was the asset | ourrour | 1/20/20 | | _ | | |
| Harrisb | ourg, PA 17108-0988 | | | | | | | |
| | Street City State Zlp Code ed the debt? Check one. | As of the date you fi | ile, the claim | IS: Check a | all that apply | | | |
| Debtor 1 | | ☐ Contingent | | | | | | |
| Debtor 2 | - | ☐ Unliquidated | | | | | | |
| | • | ☐ Disputed Type of PRIORITY u | noogurad ale | nim. | | | | |
| | and Debtor 2 only | | | allii. | | | | |
| | ne of the debtors and another | _ | · · | | | | | |
| | this claim is for a communi | <u>_</u> | | | • | | | |
| Is the claim: | subject to offset? | ☐ Claims for death o | or personal in | ury while yo | ou were intoxicated | | | |
| ☐ Yes | | Other. Specify | raffic tick | et | | | | |
| | | | | | | | | |
| | All of Your NONPRIORITY | | | | | | | |
| _ | ors have nonpriority unsecu | | | | | | | |
| ☐ No. You ha | ave nothing to report in this pa | rt. Submit this form to the court wit | th your other | schedules. | | | | |
| Yes. | | | | | | | | |
| unsecured clai | im, list the creditor separately | ims in the alphabetical order of for each claim. For each claim liste | ed, identify w | nat type of o | claim it is. Do not list o | laims already | included in | Part 1. If more |

Total claim

Part 2.

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| Debt | or 2 Linda Lee Hendrickson | | Case number (if know) | |
|------|---|--|--|----------|
| 4.1 | Capital One | Last 4 digits of account number | 4673 | \$886.00 |
| | Nonpriority Creditor's Name Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 01/05 Last Active 9/09/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.2 | Chase Bank USA Nonpriority Creditor's Name | Last 4 digits of account number | 6896 | \$68.00 |
| | PO Box 15298 Wilmington, DE 19850 | When was the debt incurred? | October | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Overdrawn | checking account | |
| 4.3 | Choice Recovery Inc | Last 4 digits of account number | 9792 | \$22.00 |
| | Nonpriority Creditor's Name 1550 Old Henderson Rd Ste 100 | When was the debt incurred? | Opened 09/13 | · |
| | Columus, OH 43220 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | O continuent | | |
| | ☐ Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | | |
| | ☐ Yes | Other. Specify Collection Neck Spec | Attorney Lake County Head | |

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| Debto | Linda Lee Hendrickson | Case number (if know) | | | | | |
|-------|--|---|--|----------|--|--|--|
| 4.4 | ComEd | Last 4 digits of account number | | \$610.00 | | | |
| | Nonpriority Creditor's Name 3 Lincoln Center Attn: Bkcy Group-Claims Dep't | When was the debt incurred? | | | | | |
| | Oakbrook Terrace, IL 60181 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Past due ba | alance utility | | | | |
| 4.5 | Comenitycapital/fe21cc Nonpriority Creditor's Name | Last 4 digits of account number | 5543 | \$201.00 | | | |
| | Po Box 182120 Columbus, OH 43218 | When was the debt incurred? | Opened 09/16 Last Active 10/09/16 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | |
| 4.6 | DirectTV Customer Service Nonpriority Creditor's Name | Last 4 digits of account number | | \$200.00 | | | |
| | P.O. Box 6550 Greenwood Village, CO 80155-6550 Number Street City State Zlp Code | When was the debt incurred? | 08/1/2016 | | | | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | s. Спеск ан that арргу | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | Check if this claim is for a community | | | | | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Month past | due | | | | |

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| | William Wyatt Hendrickson Linda Lee Hendrickson | | Case number (if know) | | | | |
|---|--|--|---|----------|--|--|--|
| | ERC/Enhanced Recovery Corp | Last 4 digits of account number | 8771 | \$439.00 | | | |
| | Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256 | When was the debt incurred? | Opened 01/15 | | | | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Collection | Attorney Sprint | | | | |
| | Foot First Podiatry Centers VPC | Last 4 digits of account number | 101F | \$138.39 | | | |
| | Nonpriority Creditor's Name 1601 W Wise Road Schaumburg, IL 60193-3554 | When was the debt incurred? | April 2016 | | | | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | As of the date you file, the claim is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Medical | | | | | |
| | Fst Premier | Last 4 digits of account number | 7167 | \$669.00 | | | |
| | Nonpriority Creditor's Name 601 S Minneapolis Ave Sioux Falls, SD 57104 | When was the debt incurred? | Opened 11/04 Last Active 3/19/12 | | | | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | ■ Other. Specify Credit Card | | | | | |

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| | r 1 William Wyatt Hendrickson r 2 Linda Lee Hendrickson | | Case number (if know) | |
|-----|---|--|---|----------|
| 4.1 | Fst Premier | Last 4 digits of account number | 9720 | \$526.00 |
| 0 | Nonpriority Creditor's Name | _ | | |
| | 601 S Minneapolis Ave Sioux Falls, SD 57104 | When was the debt incurred? | Opened 11/09 Last Active 7/18/12 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | I | |
| 4.1 | IICLCR-Integatred Imaging Nonpriority Creditor's Name | Last 4 digits of account number | 6349 | \$40.49 |
| | Consultants, PLLC 44000 Garfiled Road Clinton Township, MI 48038 | When was the debt incurred? | June 2016 | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | , | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | | |
| | Yes | Other. Specify Medical | | |
| 4.1 | Infinity Healthcare Physicians SC Nonpriority Creditor's Name | Last 4 digits of account number | 0931 | \$48.46 |
| | Box 078894 Milwaukee, WI 53278-8894 | When was the debt incurred? | June 2016 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | <u> </u> | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| | At least one of the debtors and another | ☐ Student loans | u Juniii | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | | | |
| | — 103 | Other. Specify Medical | | |

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| | | _ | |
|--|--|---|----------|
| Kohls/Capital One | Last 4 digits of account number | 8875 | \$290 |
| Nonpriority Creditor's Name Po Box 3120 Milwaukee, WI 53201 | When was the debt incurred? | Opened 11/97 Last Active 10/28/12 | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| Macy's - Dep't Stores National Bank | Last 4 digits of account number | | \$520 |
| Nonpriority Creditor's Name 701 East 60th Street Sioux Falls, SD 57104 | When was the debt incurred? | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit card | | |
| Midland Funding | Last 4 digits of account number | 3190 | \$1,056. |
| Nonpriority Creditor's Name 2365 Northside Dr | When was the debt incurred? | Opened 08/14 | |
| Suite 300 | When was the dept incurred: | Opened 00/14 | |
| San Diego, CA 92108 | | | |
| Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | d alaim. | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | u Ciaiiii. | |
| ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | manon agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | _ Factoring (| Company Account Capital One | |
| Yes | Other. Specify Bank Usa | N.A. | |

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| Linda Lee Hendrickson | Case number (if know) | |
|--|--|----------|
| Mohs Surgery and Dermatology | Last 4 digits of account number 4014 | \$19. |
| Nonpriority Creditor's Name 820 E Terra Cotta Ave., Ste. 125 | When was the debt incurred? June 2016 | |
| Crystal Lake, IL 60014 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The state gradient, and statement of the state apply | |
| ☐ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | t |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Medical | |
| Nicor Gas | Last 4 digits of account number 0000 | \$340. |
| Nonpriority Creditor's Name | | |
| Attn: Bankruptcy Dep't | When was the debt incurred? 01/10/2016 | |
| P.O. Box 549 | | |
| Aurora, IL 60507 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the damins. Oneok all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | | |
| _ | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did no | t |
| Is the claim subject to offset? | report as priority claims | · |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Past due utility | _ |
| NorthShore | Last 4 digits of account number 1414 | \$790. |
| Nonpriority Creditor's Name Po box 4108 | When was the debt incurred? | |
| Woburn, MA 01888 Number Street City State Zlp Code | As of the date year file the plains in Check all that apply | |
| Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | Пол | |
| Debtor 2 only | ☐ Contingent | |
| _ | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| ☐ Check if this claim is for a community debt | | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims | t |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | | |
| Yes | ■ Other. Specify Medical | |

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| r 2 Linda Lee Hendrickson | Case number (if know) | |
|--|---|---|
| Northshore | Last 4 digits of account number 1697 | \$445.00 |
| Nonpriority Creditor's Name Po box 4108 Woburn, MA 01888 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Medical | |
| Northwest Collectors | Last 4 digits of account number 0489 | \$200.00 |
| Nonpriority Creditor's Name 3601 Algonquin Rd Ste 232 | When was the debt incurred? | |
| Rolling Meadows, IL 60008 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Oneck an that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify 01 Lake Zurich Police Photo Enfor | |
| Pinnacle Credit Services | Last 4 digits of account number 0001 | \$1,695.00 |
| Nonpriority Creditor's Name | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Po Box 640 | When was the debt incurred? Opened 08/14 | |
| Hopkins, MN 55343 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ☐ Debtor 1 only | ☐ Contingent | |
| ■ Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | □ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Factoring Company Account Verizon Wireless | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 2 William Wyatt Hendrickson
Linda Lee Hendrickson

Name and Address
Credit Control, LLC
4710 Eisenhower Blvd.
Tampa, FL 33634

Case number (if know)

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

East 4 digits of account number

6558

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|-----------------------|-----|---|-----|----------|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total | | | | | |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 200.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 200.00 |
| | 6f. | Student loans | 6f. | T | otal Claim |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 9,204.05 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 9,204.05 |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-------------------------------------|
| Debtor 1 | William Wyatt He | ndrickson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Linda Lee Hendri | ckson | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is a amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Trade Winds
c/o Richard Kozon
36788 N Broadway Ave.
Antioch, IL 60002

State what the contract or lease is for

Annual lease (6 month usage/6 month storage) \$4,400/year\$

| | | Docume | nt Page 34 d | of 65 |
|---------------------------------------|---|--|--|---|
| Fill in this i | nformation to identify your | case: | | |
| Debtor 1 | William Wyatt He | ndrickson | | |
| DODIOI 1 | First Name | Middle Name | Last Name | |
| Debtor 2 | Linda Lee Hendri | ckson | | |
| (Spouse if, filing | First Name | Middle Name | Last Name | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | er | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | Form 106H | | | |
| Schedu | ale H: Your Cod | ebtors | | 12/15 |
| ■ No □ Yes 2. Withit Arizona ■ No. C | in the last 8 years, have you, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou | ı lived in a community pr Nevada, New Mexico, Pu | operty state or territor erto Rico, Texas, Wash | ry? (Community property states and territories include |
| in line 2 Form 10 out Col | 2 again as a codebtor only i 06D), Schedule E/F (Official umn 2. olumn 1: Your codebtor ame, Number, Street, City, State and ZI | f that person is a guaran Form 106E/F), or Sched | tor or cosigner. Make | r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fill Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line |
| - N | ame | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| | umber Street ity | State | ZIP Code | _ |
| | | | | |
| 3.2 | 000 | | | Schedule D, line |
| N | ame | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| N | umber Street | | | _ |
| Ci | ity | State | ZIP Code | |

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| | in this information to ide btor 1 Wi | | tt Hendrickson | | | | | | | | | |
|--------|---|----------------|---|----------------|-------------------------|-----------|---------------|-------------------------------|------------|---------------|----------------------|-------|
| 1 - | btor 2 Lir | - | endrickson | | | | _ | | | | | |
| . | ouse, if filing) | | NODTHERN BIOTRIC | | NOIO | | | | | | | |
| Uni | ited States Bankruptcy C | court for the: | NORTHERN DISTRIC | TOF ILLI | NOIS | | _ | | | | | |
| | se number nown) | | | | | | k if this is: | | | | | |
| (11 K1 | iowiii | | | | | | | | n amende | | postpetition ch | ontor |
| | | | | | | | | | | U | lowing date: | apiei |
| 0 | fficial Form 10 | <u> 61</u> | | | | | | M | M / DD/ Y | YYY | | |
| S | chedule I: Yo | ur Inco | ome | | | | | | | | | 12/15 |
| atta | | this form. (| r spouse is not filing wi On the top of any addition | | | | | | | | | |
| | information. | J.110 | | Debtor 1 | | | | Debtor 2 or non-filing spouse | | | | |
| | If you have more than one job, attach a separate page with information about additional | | b, Employment status* | | ■ Employed | | | | ☐ Employed | | | |
| | | | Employment status | ☐ Not employed | | | | ■ Not employed | | | | |
| | employers. | | Occupation | Driver | | | | | | | | |
| | Include part-time, seas self-employed work. | sonal, or | Employer's name | UPS | | | | | | | | |
| | Occupation may include or homemaker, if it app | | Employer's address | | nlake Pkw a, GA 3032 | • | | | | | | |
| | | | How long employed th | nere? | 26 Year *See Atta | | | | al Emplo | yment Info | rmation | _ |
| Pai | rt 2: Give Details | About Mon | thly Income | | | | | | | | | |
| | mate monthly income ause unless you are sepa | | ate you file this form. If y | ou have r | nothing to re | port for | any l | ine, write | \$0 in the | space. Incl | ude your non-fil | ing |
| | ou or your non-filing spou e space, attach a separa | | re than one employer, co | mbine the | information | for all e | mplo | yers for | that perso | on on the lin | es below. If you | need |
| | | | | | | | | For Deb | otor 1 | For Deb | tor 2 or g spouse | |
| 2. | | | ry, and commissions (becalculate what the monthly | | | 2. | \$ | 7, | 604.26 | \$ | 0.00 | |
| 3. | Estimate and list mo | nthly overti | me pay. | | | 3. | +\$ | | 0.00 | +\$ | 0.00 | |

7,604.26

\$

0.00

Calculate gross Income. Add line 2 + line 3.

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William Wyatt Hendrickson Debtor 1 Linda Lee Hendrickson Debtor 2 Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 7.604.26 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 2,150.07 0.00 Mandatory contributions for retirement plans 5b. 5b. \$ 0.00 0.00 Voluntary contributions for retirement plans 5c. 5c. 912.51 \$ 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5q. 102.92 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 3,165.50 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 4,438.76 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8h Interest and dividends 8h \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. Pension or retirement income 0.00 0.00 8g. **Net Income from Seasonabl Bartending (ended in October** 400.00 0.00 Other monthly income. Specify: 2016) 8h.+ Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 400.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 4.838.76 \$ 0.00 \$ 4.838.76 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 12. 4,838.76 applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? П Yes. Explain: Seasonal part-time employment as bartender ended in middle of October 2016.

Official Form 106I Schedule I: Your Income page 2

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| Debtor 1 | William Wyatt Hendrickson | |
|----------|---------------------------|------------------------|
| Debtor 2 | Linda Lee Hendrickson | Case number (if known) |

Official Form B 6I Attachment for Additional Employment Information

| Debtor | |
|---------------------|----------------------|
| Occupation | Bartending |
| Name of Employer | Captain's Quarters |
| How long employed | Seasonal |
| Address of Employer | 38283 N Bolten Place |
| | Antioch, IL 60002 |

Official Form 106I Schedule I: Your Income page 3

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| Fill | in this informa | ition to identify yo | ur case: | | | | | | | |
|------------|------------------------------|---|----------------|---|--|----------------------|----------------|-------------------------------------|--|-----|
| Deb | otor 1 | William Wyat | tt Hendri | ckson | | Ch | | this is: | | |
| Deh | otor 2 | Linda Lee He | on drieke. | nn. | | | | amended filing | ving postpetition chapter | - |
| | ouse, if filing) | Linua Lee He | maricks | on | | | | | the following date: | |
| Unit | ed States Bankı | ruptcy Court for the: | : NORTH | ERN DISTRICT OF ILLIN | OIS | | MM | I / DD / YYYY | | |
| Cas | e number | | | | | | | | | |
| (If k | nown) | | | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | | | |
| S | chedule | J: Your I | Exper | ises | | | | | 12 | /1! |
| Be info | as complete ormation. If m | and accurate as | possible. | . If two married people ar ch another sheet to this | | | | | or supplying correct | |
| Par 1. | t 1: Descr Is this a joir | ribe Your House | hold | | | | | | | _ |
| ١. | □ No. Go to | | | | | | | | | |
| | _ | es Debtor 2 live i | in a separ | ate household? | | | | | | |
| | ■ N | o | | | | | | | | |
| | ЦΥ | es. Debtor 2 mus | st file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of De | ebtor : | 2. | | |
| 2. | Do you have | e dependents? | □ No | | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | _ | Dependent's age | Does dependent live with you? | |
| | Do not state dependents | | | | Daughter | | | 19 | □ No ■ Yes | |
| | | | | | | | | | □ No | |
| | | | | | Son | | | 22 | ■ Yes □ No | |
| | | | | | | | | | □ No □ Yes | |
| | | | | | | | | | □ No | |
| 2 | De veur evr | aanaaa inaliida | _ | | | | | | ☐ Yes | |
| 3. | expenses o | oenses include f people other th | han 🗖 | No | | | | | | |
| | yourself and | d your depender | nts? ⊔ | Yes | | | | | | |
| Est | imate your ex | ate Your Ongoir openses as of your a date after the b | our bankrı | y Expenses uptcy filing date unless y y is filed. If this is a supp | ou are using this follower that the second s | orm as a J, check | suppl the b | lement in a Cha oox at the top o | apter 13 case to report f the form and fill in th | e |
| the | value of sucl | h assistance and | | government assistance i luded it on <i>Schedule I:</i> \ | | | | Your exp | enses | |
| (Uf | ficial Form 10 | юі.) | | | | | | Tour oxp | | |
| 4. | | or home ownersl and any rent for the | | ses for your residence. I | nclude first mortgage | e 4. | \$_ | | 2,100.00 | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | • | rty, homeowner's | | | | 4b. | | | 0.00 | |
| | | maintenance, re owner's associati | • | upkeep expenses dominium dues | | 4c. 4d. | _ | | 75.00 0.00 | |
| 5. | | | | our residence, such as ho | me equity loans | | \$ - | | 0.00 | |

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| or 1 William Wyatt Hendrickson Linda Lee Hendrickson | Case num | ber (if known) | |
|---|--------------|----------------|------------------------|
| Utilities: | | | |
| 6a. Electricity, heat, natural gas | 6a. | \$ | 225.00 |
| 6b. Water, sewer, garbage collection | 6b. | \$ | 100.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 560.00 |
| 6d. Other. Specify: | 6d. | \$ | 0.00 |
| Food and housekeeping supplies | | \$ | 750.00 |
| Childcare and children's education costs | 8. | \$ | 0.00 |
| Clothing, laundry, and dry cleaning | 9. | \$ | 75.00 |
| Personal care products and services | 10. | \$ | 100.00 |
| Medical and dental expenses | 11. | \$ | 120.00 |
| Transportation. Include gas, maintenance, bus or train fare. | | · - | |
| Do not include car payments. | 12. | \$ | 300.00 |
| Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| Charitable contributions and religious donations | 14. | \$ | 20.00 |
| Insurance. | | | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | 45: | c | |
| 15a. Life insurance | 15a. | | 70.00 |
| 15b. Health insurance | 15b. | · · | 0.00 |
| 15c. Vehicle insurance | 15c. | \$ | 265.00 |
| 15d. Other insurance. Specify: Boat Ins | 15d. | \$ | 26.00 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ | 0.00 |
| Installment or lease payments: | 4- | • | |
| 17a. Car payments for Vehicle 1 | 17a. | · | 288.00 |
| 17b. Car payments for Vehicle 2 | 17b. | · | 0.00 |
| 17c. Other. Specify: Boat payments | 17c. | \$ | 386.00 |
| 17d. Other. Specify: | 17d. | \$ | 0.00 |
| Your payments of alimony, maintenance, and support that you did not report as | ; 18. | 2 | 0.00 |
| deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). Other payments you make to support others who do not live with you. | 10. | \$ | 0.00 |
| Specify: | 19. | Ψ | 0.00 |
| ਠਸ਼ਰਾਸਤ. Other real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e | | our Income | |
| 20a. Mortgages on other property | 20a. | | 0.00 |
| 20b. Real estate taxes | 20b. | · · | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | · - | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| 20e. Homeowner's association or condominium dues | 20a. | · - | 0.00 |
| Other: Specify: Trade Winds Chain of Lakes Rental Lot | | Ψ +\$ | 360.00 |
| other. Specify. ITade willus Chain of Lakes Kentai Lot | | -Ψ | 300.00 |
| Calculate your monthly expenses | | | |
| 22a. Add lines 4 through 21. | | \$ | 5,895.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 5,895.00 |
| Calculate your monthly net income. | | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,838.76 |
| 23b. Copy your monthly expenses from line 22c above. | 23a. 23b. | · | |
| 200. Copy your monthly expenses from line 226 above. | 230. | Ψ | 5,895.00 |
| 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | 23c. | \$ | -1,056.24 |
| Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? | | | or decrease because of |
| □ No. | | | |
| ■ Yes. Explain here: Possible college expenses for children. | | | |

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| Fill in this inforr | mation to identify your | case: | | | |
|---------------------------------------|--|----------------------------|----------------------------------|--|-------|
| Debtor 1 | William Wyatt He | ndrickson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Linda Lee Hendr | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF | FILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check if this amended fili | |
| | ion About a | | Debtor's Sched | | 12/15 |
| obtaining money years, or both. 18 | / or property by fraud i 8 U.S.C. §§ 152, 1341, ∕ | n connection with a bankru | | a false statement, concealing prop p to \$250,000, or imprisonment for | |
| Sigr | n Below | | | | |
| Did you pa | y or agree to pay some | eone who is NOT an attorne | y to help you fill out bankrupto | cy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | Attach Bankruptcy Petition Prepare Declaration, and Signature (Official | |
| | Ity of perjury, I declare e true and correct. | that I have read the summa | ry and schedules filed with th | is declaration and | |
| Y /c/\A/:11 | iom Wyott Hondrick | non | X /s/ Linda Lee Hend | kiakaan | |
| | liam Wyatt Hendrick n Wyatt Hendricksor | | Linda Lee Hendric | | |
| | re of Debtor 1 | = | Signature of Debtor 2 | | |
| Date (| October 31, 2016 | | Date October 31. | 2016 | |

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| Fill | in this infor | nation to identify your | case: | | | |
|--------------------|--|--|--|---|---|---|
| Deb | otor 1 | William Wyatt He | endrickson | | | |
| | | First Name | Middle Name | Last Name | | |
| | otor 2 | Linda Lee Hendr | | | | |
| (Spo | use if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ted States Ba | nkruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| | se number _ own) | | | | _ | heck if this is an mended filing |
| Sta | | of Financial | | duals Filing for B | | 4/16 |
| nfo | rmation. If n | nore space is needed, n). Answer every ques | attach a separate sheet to stion. | this form. On the top of any | equally responsible for sup | |
| Par | t 1: Give I | Details About Your Ma | rital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | s? | | | |
| | ■ Married□ Not ma | | | | | |
| 2. | During the I | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. Lis | st all of the places you li | ved in the last 3 years. Do no | ot include where you live now | <i>.</i> | |
| | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. state | | | | | ity property state or territory co, Texas, Washington and W | |
| | ■ No □ Yes Ma | aka sura yau fill aut Sak | radula H. Vaur Cadabtara (O | fficial Form 106H) | | |
| | Tes. IVI | ake sure you fill out Scr. | edule H: Your Codebtors (O | iliciai Foitii 100H). | | |
| Par | t 2 Expla | in the Sources of You | r Income | | | |
| 4. | Fill in the total | al amount of income you | received from all jobs and a | ng a business during this yeall businesses, including parter together, list it only once ur | | ndar years? |
| | □ No | | | | | |
| | Yes. Fil | I in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year untiled for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$72,349.95 | ■ Wages, commissions, bonuses, tips | \$19,000.00 |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson

Case number (if known)

| | | Debtor 1 | | Debtor 2 | |
|--------------------------------|--|---|---|--|---|
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For last cale (January 1 to | ndar year: o December 31, 2015) | ■ Wages, commissions, bonuses, tips | \$61,228.89 | ■ Wages, commissions, bonuses, tips | \$30,012.10 |
| | | ☐ Operating a business | | ☐ Operating a business | |
| | ndar year before that: o December 31, 2014) | ■ Wages, commissions, bonuses, tips | \$73,190.86 | ■ Wages, commissions, bonuses, tips | \$12,447.82 |
| | | ☐ Operating a business | | ☐ Operating a business | |
| winnings. List each No | . If you are filing a joint ca | s; pensions; rental income; inter ase and you have income that y come from each source separa | you received together, list it or | nly once under Debtor 1. | d gambling and lotter |
| | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and | Debtor 2 Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | ry 1 of current year unti filed for bankruptcy: | il Stock Liquidation | exclusions) \$10,802.67 | | |
| For last cale | | Federal Tax Return | \$3,885.00 | | |
| | | State Tax Return | \$202.00 | | |
| | | | | | |
| | ndar year before that: D December 31, 2014) | Federal Tax Return | \$6,660.00 | | |
| | | Federal Tax Return State Tax Return | \$6,660.00 \$554.00 | | |
| | | | | | |

Entered 10/31/16 14:03:55 Case 16-34719 Doc 1 Filed 10/31/16 Desc Main Page 43 of 65 Document William Wyatt Hendrickson Debtor 1 Linda Lee Hendrickson Debtor 2 Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe Consumer Portfolio Svc 7/22, 7/29, 8/5, \$900.00 \$4,308.00 □ Mortgage Attn: Bankruptcy 8/12, 8/19, 8/26, ■ Car 9/2, 9/9, 9/16, 9/23, 19500 Jamboree Rd ☐ Credit Card Irvine, CA 92612 9/30, 10/7 ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. Insider's Name and Address Reason for this payment Dates of payment Total amount Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment Include creditor's name still owe paid Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Nο

Yes. Fill in the details.

Case title Nature of the case Court or agency Status of the case Case number

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson

Case number (if known)

| Case title Nature of the case Court or agency Case number | | Court or agency | Status of | the case | |
|--|---|---|----------------------------|--|--|
| Bank of America N.A. vs. Williamm W. Hendrickson, et al 13-CH-02419 | Residential Foreclosure - Foreclosure judgment entered February 17, 2016. Hearing to confirm sale scheduled for 11/18/2016 for \$127,401.00 sale amount on auction sale dated 5/24/16. Foreclosure Defense counsel for Debtors are challenging validity of sale, and are seeking an order voiding the sale. | | ☐ On app☐ Conclu | ☐ Pending ☐ On appeal ☐ Concluded Confirmation Sale Hearing Scheduled for November 18, 2016 | |
| Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below. | | erty repossessed, foreclosed | d, garnished, attache | ed, seized, or levied? | |
| Creditor Name and Address | Describe the Property | | Date | Value of the | |
| | Explain what happene | d | | property | |
| Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410 | amount on auction | ebruary 17, 2016. sale scheduled for 16 for \$127,401.00 sale sale dated 5/24/16. e counsel for Debtors dity of sale, and are siding the sale. essed. | 02/17/2016 | \$189,000.00 | |
| | ☐ Property was garnish | | | | |
| | ☐ Property was attached | ed, seized or levied. | | | |
| Within 90 days before you filed for bankrup accounts or refuse to make a payment becan solve a solve and solve a solve a solve and solve a solve a solve and | | cluding a bank or financial in | stitution, set off any | amounts from your | |
| Creditor Name and Address | Describe the action the | e creditor took | Date action was | Amount | |
| Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes | cy, was any of your prop nother official? | erty in the possession of an | taken assignee for the ber | nefit of creditors, a | |

10.

11.

12.

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Debtor 2 Linda Lee Hendrickson Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Value of property Describe the property you lost and Date of your Describe any insurance coverage for the loss how the loss occurred lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of transferred or transfer was Address payment **Email or website address** made Person Who Made the Payment, if Not You \$1,785.00 Tomei I aw Attorney Fees, including filing fee 10/10/16: 223 N Milwaukee Ave., Ste. 14 10/28/16 Gurnee, IL 60031 robert@tomeilawfirm.com \$20 for pre-petition credit counseling October 25, \$20.00 CC Advising, Inc. 703 Washington Ave., Ste. 200 2016 class Bay City, MI 48708-5732 www.ccadvising.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made

William Wyatt Hendrickson

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson

Case number (if known)

| | Person Who Was Paid Address | Description and v transferred | Description and value of any property transferred | | | Amount of payment | | |
|-----|--|---|--|--|---|---|--|--|
| | Jutla & Dovitz PC 25 N County Street, Ste. 2R Waukegan, IL 60085 | counsel. Month \$550/mo - paym | Payments for foreclosure defense Monthly counsel. Monthly payment estimated \$550/mo - payment below represents aggregate amount over past year. | | | | | |
| 18. | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details. | | | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | | Description and value of property transferred payments repaid in excl | | | Date transfer was made | | |
| | William Hendrickson 401 Wagonwood Court Round Lake, IL 60073 | Liquidation, 100 | UPS Class A Common Stock Liquidation, 100 shares = 20 \$10,802.67 Net Amount of Sale | | | | | |
| | Debtor | | | | | | | |
| 19. | Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details. | | y property to a s | elf-settled tr | ust or similar device | of which you are a | | |
| | Name of trust | Description and v | alue of the prope | erty transfer | red | Date Transfer was made | | |
| Par | t 8: List of Certain Financial Accounts, Inst | ruments, Safe Deposit | Boxes, and Sto | rage Units | | | | |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? | were any financial ac | counts or instru | ments held i | n your name, or for yo | our benefit, closed, | | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | | Last 4 digits of account number | Type of accour instrument | cle me | ate account was osed, sold, oved, or ansferred | Last balance before closing or transfer | | |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for | bankruptcy, any | / safe depos | it box or other depos | itory for securities, | | |
| | □ No■ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the contents | | Do you still have it? | | |
| | NorStates Bank 1777 N Cedar Lake Rd Round Lake, IL 60073 | William Hendrickson | | Insurance policies, savings bonds for children gifted by debtor's parents. | | □ No ■ Yes | | |

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Debtor 1 William Wyatt Hendrickson
Debtor 2 Linda Lee Hendrickson

Case number (if known)

| 22 | Have you stored property in a storage unit or pla | ace other than your home within 1 | vear before you filed for bankruntoy | 2 | | | | | | | |
|-----|---|---|---------------------------------------|-----------------------|--|--|--|--|--|--|--|
| 22. | have you stored property in a storage drift of ple | de other than your nome within i | year before you med for bankruptey | • | | | | | | | |
| | No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | | | | |
| Par | 9: Identify Property You Hold or Control for S | Someone Else | | | | | | | | | |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | | | | | |
| Par | 10: Give Details About Environmental Informa | ition | | | | | | | | | |
| For | he purpose of Part 10, the following definitions a | apply: | | | | | | | | | |
| _ | Environmental law means any federal, state, or I toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub | r, land, soil, surface water, ground estances, wastes, or material. | dwater, or other medium, including st | atutes or | | | | | | | |
| | Site means any location, facility, or property as or to own, operate, or utilize it, including disposal s | - | law, whether you now own, operate, o | or utilize it or used | | | | | | | |
| | Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s | | s waste, hazardous substance, toxic s | substance, | | | | | | | |
| Rep | ort all notices, releases, and proceedings that yo | u know about, regardless of wher | n they occurred. | | | | | | | | |
| 24. | Has any governmental unit notified you that you | may be liable or potentially liable | under or in violation of an environme | ental law? | | | | | | | |
| | ■ No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and | Environmental law, if you know it | Date of notice | | | | | | | |
| 25. | ZIP Code) Have you notified any governmental unit of any release of hazardous material? | | | | | | | | | | |
| | | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of site | Governmental unit | Environmental law, if you | Date of notice | | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) | | Date of Hotice | | | | | | | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | | | |
| | No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | | | | |
| Par | 11: Give Details About Your Business or Conr | nections to Any Business | | | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, d | lid you own a business or have ar | y of the following connections to any | / business? | | | | | | | |
| | ☐ A sole proprietor or self-employed in a to | | • | | | | | | | | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | ip (LLP) | | | | | | | | |
| | | | | | | | | | | | |

Entered 10/31/16 14:03:55 Case 16-34719 Doc 1 Filed 10/31/16 Desc Main Page 48 of 65 Document William Wyatt Hendrickson Debtor 1 Debtor 2 Linda Lee Hendrickson Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ William Wyatt Hendrickson /s/ Linda Lee Hendrickson William Wyatt Hendrickson **Linda Lee Hendrickson** Signature of Debtor 1 Signature of Debtor 2 Date October 31, 2016 October 31, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

☐ Yes

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| Fill in this inform | nation to identify your case: | | |
|--------------------------------|---|--|---|
| | | | |
| Debtor 1 | William Wyatt Hendrickson First Name Middle Name | Last Name | |
| Debtor 2 | Linda Lee Hendrickson | | |
| (Spouse if, filing) | First Name Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: NORTHERN DIS | TRICT OF ILLINOIS | |
| Case number | | | |
| (if known) | | | Check if this is an amended filing |
| Official Fo Statemer | | /iduals Filing Under Chapte | er 7 12/15 |
| creditors have | vidual filing under chapter 7, you must fi e claims secured by your property, or ed personal property and the lease has r | | |
| You must file this | s form with the court within 30 days after ver is earlier, unless the court extends th | you file your bankruptcy petition or by the date see time for cause. You must also send copies to th | |
| | ople are filing together in a joint case, bo d date the form. | oth are equally responsible for supplying correct in | nformation. Both debtors must |
| write yo | and accurate as possible. If more space in our name and case number (if known). Our Creditors Who Have Secured Claims | s needed, attach a separate sheet to this form. On | the top of any additional pages, |
| | ors that you listed in Part 1 of Schedule I | D: Creditors Who Have Claims Secured by Property | y (Official Form 106D), fill in the |
| | editor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| | ank Of America | ☐ Surrender the property. | □No |
| name: Description of | 401 N Wagonwood Court Round | Retain the property and redeem it.Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: | Lake, IL 60073 Lake County | Retain the property and [explain]: | |
| _ | onsumer Portfolio Svc | ☐ Surrender the property. | □ No |
| name: | | Retain the property and redeem it. | ■ Yes |
| Description of property | 2008 Dodge Avenger SXT 4D 130,000 miles | ☐ Retain the property and enter into a Reaffirmation Agreement.☐ Retain the property and [explain]: | — 165 |
| securing debt: | | | _ |

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| | | | | vatt Hendrickson Hendrickson | | | Case number (| if known) | | |
|---|--|--------|--------|--|-------------------|---|--|---------------------|------------------|--|
| | Creditor's | S Ke | eyban | k NA | | ender the p ain the prop | roperty. erty and redeem it. | □No | | |
| F | Description of the contract of | | 233/ |) Sunesta Boat Chaparra DB rage Retail Value Per NAI | l Rea | affirmation A | erty and enter into a Agreement. erty and [explain]: | ■ Yes | | |
| For in t | Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). | | | | | | | | | |
| De | scribe y | our ur | nexpir | ed personal property leases | | | | Will the leas | se be assumed? | |
| Les | ssor's na | me: | | Trade Winds | | | | □ No | | |
| | Description of leased Property: Annual lease (6 month usage/6 month storage) - \$4,400/year Part 3: Sign Below | | | | | | | | | |
| Unc | ler pena | Ity of | perjur | y, I declare that I have indica to an unexpired lease. | ated my intention | n about an | property of my estate | that secures a debt | and any personal | |
| X | /s/ Wi | lliam | Wyat | t Hendrickson | | X /s/ | Linda Lee Hendricks | on | | |
| X /s/ William Wyatt Hendrickson William Wyatt Hendrickson Signature of Debtor 1 | | | | endrickson | | Linda Lee Hendrickson Signature of Debtor 2 | | | | |
| | Date | 00 | ctobe | r 31, 2016 | | Date | October 31, 2016 | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-34719 Doc 1 Filed 10/31/16 Entered 10/31/16 14:03:55 Desc Main Document Page 55 of 65

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In | re | William Wyatt Hendricks Linda Lee Hendrickson | on | | | Case No. | | |
|------|----------|--|--|--|--|--|--|-------|
| | - | Linda Lee Hendrickson | | Debte | or(s) | Chapter | 7 | |
| | | DICCI OCUI | PE OF COMPL | ENICATIONI (| NE ATTODNE | y EAD DE | EDTAD(C) | |
| | | | RE OF COMPE | | | | | |
| 1. | con | rsuant to 11 U.S.C. § 329(a) a mpensation paid to me within corendered on behalf of the debt | one year before the fil | ing of the petition | in bankruptcy, or agr | eed to be paid | to me, for services rendered or | r to |
| | | For legal services, I have ag | reed to accept | | | \$ | 1,785.00 | |
| | | Prior to the filing of this stat | | | | \$ | 1,785.00 | |
| | | Balance Due | | | | \$ | 0.00 | |
| 2. | The | e source of the compensation p | paid to me was: | | | | | |
| | | ■ Debtor □ Other | (specify): | | | | | |
| 3. | The | e source of compensation to be | e paid to me is: | | | | | |
| | | ■ Debtor □ Other | (specify): | | | | | |
| 4. | | I have not agreed to share the | e above-disclosed com | pensation with an | y other person unless | they are mem | bers and associates of my law | firm. |
| | | I have agreed to share the abordopy of the agreement, togeth | | | | | | A |
| 5. | In | return for the above-disclosed | fee, I have agreed to | render legal servic | e for all aspects of the | e bankruptcy c | ase, including: | |
| | b. c. | Analysis of the debtor's finance Preparation and filing of any preparation of the debtor as [Other provisions as needed] Negotiations with semotions pursuant to | petition, schedules, sta at the meeting of credi ecured creditors to | atement of affairs a tors and confirmat | and plan which may be ion hearing, and any et value; exemption | e required; adjourned hea on planning; | rings thereof; preparation and filing of | |
| 6. | Ву | agreement with the debtor(s), Representation of th any other adversary | e debtors in any d | ee does not includ | e the following service actions, judicial lie | e: en avoidanc | es, relief from stay actions | s or |
| | | | | CERTIFICA | TION | | | |
| this | | ertify that the foregoing is a co kruptcy proceeding. | emplete statement of a | ny agreement or a | rangement for payme | ent to me for re | epresentation of the debtor(s) i | n |
| | Oct | ober 31, 2016 | | /s/ R | obert Tomei | | | |
| - | Date | 2 | | | ert Tomei 6310339 | | | |
| | | | | Tome | ture of Attorney ei Law | | | |
| | | | | | N Milwaukee Ave., ee, IL 60031 | Ste. 14 | | |
| | | | | | 596-7494 Fax: 847 | -589-2263 | | |
| | | | | | rt@tomeilawfirm.c | om | | |
| | | | | Name | of law firm | | | |



223 N Riverside Dr. (Rt. 21), Suite 14 Gurnee, Illinois 60031 Telephone: 847.596.7494; FAX: 847.589.2263

Bankruptcy Retainer Agreement

OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to the undersigned ("Client") by Robert J. Tomei Jr. ("Attorney") in connection with the representation of Client regarding bankruptcy matters, Client, agrees as follows:

- 1. Client understands that there are essentially four (4) Chapters of the Bankruptcy Code under which Client may seek relief:
 - a. Chapter 7 Liquidation (Individuals and Corporations)
 - b. Chapter 11 Protection and reorganization for Individuals and Business Corporations
 - c. Chapter 12 Family Farm or Fishermen
 - d. Chapter 13 Wage Earners Plan
- U.S. bankruptcy laws require that your financial information be subjected to a "Means Test" to determine your eligibility to file a bankruptcy case. Attorney cannot assure you in advance of the outcome of this Means Test, as it requires a complete review of your financial records and potential challenges from the U.S. Trustee.
- 2. Client understands that Client will be charged and agrees to pay all fees and costs in connection with Attorney's representation of the Client regarding the Client's bankruptcy matters **prior to the filing of Client's case**, with at a minimum, half due upon the retention of attorney's services, including without limitation, attorney's fees and court costs, as set forth below. In the event client does not pay for attorney's services in full upon retention, Client shall be under a continued obligation to make monthly payments towards Client's installment account in an amount agreed upon between Attorney and Client, but at no less than \$100.00 per month.
 - A. For those clients passing the Means Test (and for those where the Means Test is inapplicable):
 - Streamlined Chapter 7 Individual with only consumer debt, Client pays in full upon retention of Attorney's services, Client passes the Means Test without having to complete official Bankruptcy Form 122A-2, Client has less than 25 total creditors/notice recipients, Client is either unemployed, or a W-2 employee (no self-employment), after client takes all allowable statutory exemptions, there are no assets left to administer on behalf of client's creditors (i.e., a "no-asset" case), Client uses an email address assigned to themselves as the primary medium of written communication with Attorney, and Client completes an on-line questionnaire (no exceptions):

Minimum Fee: \$999.00 (attorney fee) + \$335 (filing fee) = \$1,334.00.

Standard Chapter 7 Individual with only consumer debt:
 Minimum Fee: \$1,250.00 (attorney fee) + \$335 (filing fee) = \$1,585.00.

Chapter 7 Joint Bankruptcy with only consumer debt: Minimum Fee: \$1,450 (attorney fee) + \$335 (filing fee) = \$1,785.00. Chapter 7 Individuals with business debts or over 50 creditors or Corporations:

Minimum Fee: \$1.750.00 (attorney fee) + \$225.00 Ent.

Minimum Fee: \$1,750.00 (attorney fee) + \$335.00 Filing fee = \$2.085.00.

Chapter 7 Joint Bankruptcy with business debts or over 50 creditors or Corporations: 41,785,00 · **Minimum Fee:** \$1,950.00 (attorney fee) + \$335.00 Filing fee = \$2,285.00. Concludes AHyfre

Chapter 11 Small Business (9 or less employees or under 25 creditors) Minimum Fee: a film (ic) . \$5,000.00 (attorney fee) + \$1,717 filing fee + \$175.00 per hour over 25 hours = $\frac{$6,717.00}{}$.

- \$900 (Returner) Chapter 11 Large Business (10 or more employees) Minimum Fee: \$8,000.00 (attorney fee) + 1,717.00 filing fee + \$175.00 per hour over 75 hours = 9.717.00.

(CONTRACTOR) Chapter 13 Wage Earner's Plan Minimum Fee: \$3,000.00 (attorney fee) + \$310.00 filing fee = \$3,310.00. (Fee negotiated upward if business assets are involved.)

Additional Fees may apply in the event that:

e man so total creditors (proc.oc

- Client(s) either desires or requires Attorney to procure his/her credit reports from a third party provider (\$30.00 individual filings/\$50.00 for joint filers); and/or
- Client(s) owns a business. For each business association, there will be another \$375.00 charge).
- Filing Fee Waiver Request: Should a filing fee waiver be requested and the filing fee not be included in the initial payment, and said request be denied by the court, Client acknowledges that s/he will be ordered to make installment payments according to the payment schedule provided by the court and that any prior down payment will not include filing fees.
- Filing Fee Installment Payment Request: Client acknowledges that it is his/her responsibility to make the installment payments to the Clerk of the Bankruptcy Court. Client understands that should the Clerk not receive installment payments according to the schedule provided for in the Form 3A Filing Fee Installment Request Order, Client's case may be dismissed.

Client acknowledges that filing fee installment payments must be rendered according to the following guidelines: (1) Made via cashier's check, certified check, or money order. The Bankruptcy Clerk DOES NOT accept personal checks; (2) In 4 (four) equal amounts of \$83.75 according to the Form 3A Installment Filing Fee request Order, or a balance payoff should Client choose; (3) Made Payable to "Clerk, U.S. Bankruptcy Court", with Client's Bankruptcy case number in the memo line; (4) Sent Certified USPS to the US Bankruptcy Court, Eastern Division, 219 S. Dearborn, Chicago, IL 60604;

- Filing Fee Increases: Client understands and acknowledges that, from time to time, the United States Bankruptcy Court may periodically increase the filing fee(s) in connection with a bankruptcy filing under each Chapter. Client further understands and acknowledges that, should any such increase take place subsequent to entering into this Agreement and directly affect the Chapter that Client has retained Attorney's services for, Client is responsible for paying the difference of the increase to Attorney upon demand.
- E. A retainer of \$ 900. was paid on 10/10/2016. A retainer is an advance payment for Attorney services and the expenses Attorney may incur on Clients behalf and does not cover the court filing fee. Client understands that such amount will be credited against any amount Client owes Attorney and will not

not consumed by fer or casts,

be refunded regardless if Client decides to cancel filing of the bankruptcy petition or not.

As explicitly discussed before entering into this arrangement, Attorney has determined that Client's interests in this matter and the nature of the matter in which Attorney has been retained are best served by the 'advance payment retainer' and so Attorney requires such payment in this engagement.

The retainer fee will **not** be held in a separate trust account, and becomes the property of Attorney, upon payment. As an alternative to the advanced payment retainer, the client could place money in a security retainer (i.e., escrow account) with the attorney to secure payment of fees in the future. This is a client choice if desired. The client is advised that the attorney could not represent client in this case without an 'advanced payment retainer' however, as the 'advanced payment retainer' is necessary to mitigate attorneys' exposure to risk in this matter. Therefore, Attorney has selected this method because he feels it is better suited to the client's ability to pay for services rendered, which is the primary reason it is being used in this case.

Client acknowledges that an 'advanced payment retainer' is recognized and approved under Illinois law as a present payment by you to Attorney, in exchange for Attorney's commitment to provide legal services to Client. As discussed above, ownership of this sum passes to Attorney immediately upon receipt of Client's advance payment retainer, and therefore the funds will not be held in a client trust account.

- F. Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash, money order or debit card.
- G. In the event that Attorney is instructed or otherwise required to perform additional services in addition to those set forth in Paragraph 5 below, the following hourly rates shall apply: Robert J. Tomei Jr., \$225.00. This hourly rate shall be billed out in 1/10 per hour increments, or every 6 minutes.
- Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all attorneys in this state. If a Client, in the course of representation by an attorney, perpetrates a fraud upon any person or tribunal, the attorney is obligated to call upon the Client to rectify the same. If the Client refuses or is unable to do so, the attorney is required to reveal the fraud to the affected person or tribunal. Attorney may also terminate representation with Client(s)'s consent, or for cause, including: Client(s)'s failure to pay fees when due; Client(s) is in breach of this Contract; Client(s) is unresponsive or uncooperative; or circumstances would render Attorney's continuing representation unlawful or unethical. Client acknowledges that once the bankruptcy case is filed, Attorney's representation of Client(s) continues through the time Client(s) receives a discharge (except regarding violations of the permanent injunction as provided for in 11 USC § 524), the case is dismissed, the case is converted, or the Bankruptcy Court approves Attorney's withdrawal from representation. Client(s) may terminate Attorney's representation at any time.
- 4. Client(s) agrees to: Discuss with Attorney the Client(s)'s objectives in filing the case; Provide Attorney with full, accurate and timely information, financial or otherwise, including properly documented proof of income and two (2) years of tax returns; Cooperate with Attorney in preparing all required bankruptcy papers and documents, thoroughly reviewing drafts of documents, and promptly advising Attorney of corrections or additions needed; Timely provide Attorney with any additional documents requested by the bankruptcy trustee or other parties in interest; Notify Attorney of any change in address or telephone number; Appear punctually at the meeting of creditors with a picture identification card and proof of social security number; Comply with all orders of the Bankruptcy Court; and Complete the required instructional course in personal financial management. Failure of Client(s) to cooperate fully with Attorney or comply with any request of the bankruptcy trustee or court order may result in Attorney filing a motion with the Bankruptcy Court to withdraw from representation of Client(s).

- 5. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 6. Client agrees that Attorney may discard Client records within seven (7) years of the completion of the Client's bankruptcy case.
 - 7. Attorney shall provide Client with the following services:
 - a. Review and analyze Clients financial circumstances based on information provided by Client.
 - b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Client's options, including but not limited to bankruptcy options.
 - c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
 - d. Advise Client of the appropriate requirements in connection with the filing of a bankruptcy case, including the duties of Client connected with such filing.
 - e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the attorney's service relative to providing bankruptcy assistance or other legal services to Client.
 - f. Assuming that a U.S. Bankruptcy proceeding is filed, attorney services will include all typical attorney required participation in such proceeding, including but not limited to, appearances at Court hearings, preparation of legal memoranda, and communication with opposing counsel and parties.
 - g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided.
- 8. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the attorney, before the bankruptcy petition can be prepared and filed with the court.
- 9. Client acknowledges that he/she must attend pre-petition credit counseling before the bankruptcy petition can be filed. Client understands that he/she must also attend post-petition counseling after the bankruptcy petition is filed and within the time frame allowed by statute. Client acknowledges that the bankruptcy cannot be filed without the certificate of completion of the pre-bankruptcy credit counseling. Client understands that no discharge of debts will be issued if the post-bankruptcy credit counseling is not completed within the statutory time frame. Fees for all counseling services are the responsibility of the Client and are NOT INCLUDED in the retainer fee.
- 10. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Client's bankruptcy proceedings, and to suggest to another court that Client's proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the attorney of a pending lawsuit does not obligate Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another attorney to represent Client is a courtesy only. The attorney is not associated with any other attorney outside of the undersigned attorney's law offices.

- 11. Client acknowledges that Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability. Additionally, Client shall incur an additional fee of \$30.00 to the court, as well as additional fees to Attorney for additional services in connection with filing of amendments to Creditor lists as a result of Client's failure to provide sufficient creditor information prior to filing.
- 12. Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, Attorney will not take any action on Client's behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
 - a. Motions to revoke a discharge.
 - b. Removal of a pending action in another court.
 - c. Obtaining title reports.
 - d. The determination of real estate or tax liens.
 - e. Appeals to the BAP, District Court of Court of Appeals.
 - f. Correcting credit reports.
 - g. Obtaining credit reports.
 - h. Negotiations with Check Systems regarding Client.
 - i. Motions to Dismiss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
 - j. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargeability of debts.
 - k. Preparing reaffirmation agreements, negotiating the terms of reaffirmation agreements proposed by creditors, motions to redeem personal property, and negotiating reaffirmation agreements when Client's income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
 - I. Motion to impose or extend the bankruptcy stay.
- Client understands that certain debts cannot be discharged in bankruptcy. Client agrees that Client is still liable to repay any debt not discharged in Client's bankruptcy. Client understands that the debts listed below are common examples of the types of debts that cannot be discharged in bankruptcy. Client further understands that the list of non-dischargeable debts may be expanded by legislation or court decisions and Attorney has no control over the type of debts that may be or become non-dischargeable.
 - a. Certain types of taxes, custom duties, or debts to pay taxes or custom duties.
 - b. Student loans.
 - c. Debts owed for spousal or child support.
 - d. Debts owed to the spouse, former spouse, or child in a domestic relations proceeding.
 - e. Debts arising from a previous bankruptcy wherein discharge of that particular debt was waived.
 - f. Debts owed for money, property, services, extension-or-removal, or refinancing of credit, if obtained by false pretenses, or false representations, or actual fraud.
 - g. Consumer debts for luxury goods obtained within ninety (90) days of the date of filing of the bankruptcy petition.
 - h. Cash advances obtained within seventy (70) days of the date of the filing of the bankruptcy petition.
 - Debts owed for fraud or defalcation while acting in a fiduciary capacity, or embezzlement or larceny.
 - j. Debts owed for fines, penalties, or forfeitures payable to and for the benefit of governmental entity.

- k. Debts owed for death or personal injury arising from the operation of a motor vehicle, boat, or aircraft while intoxicated by drugs or alcohol.
- any real estate, nor does it automatically discharge or remove any liens from personal property such as automobiles. Client agrees that Attorney will not take any action to avoid (remove) any lien on real estate or personal property unless Client specifically authorizes Attorney to do so in writing. Client agrees that Attorney will rely on Client's statements concerning ownership of real property and any liens attached to Client's real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Client wishes to obtain one. Additionally, Client agrees and acknowledges that should Client wish to retain property secured by a lien of any kind, Client must continue making voluntary payments to the Creditor holding such lien through whatever means available to the Client, up to and including sending payment to the creditor in the form of check or money order via US Mail. Client agrees to hold Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients property.
- 15. Client understands that individuals who file for relief under the U.S. bankruptcy laws are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
- days from the first date Attorney is retained to finalize the bankruptcy petition and schedules due to additional due diligence and other update work required to finalize the bankruptcy. In conjunction with potential additional fees, Client understands that Attorney cannot guarantee Client's asset, income, and means testing analyses provided at the outset of representation would still be applicable, in the event Client has a change in circumstances with respect to, including, but not limited to, income, assets, and or reduced monthly expenses.
- 18. Client authorizes Attorney to share Client's collection letters, and other debt related materials, including, but not limited to credit reports and telephone records, with outside counsel, at no additional cost to Client, for purposes of ascertaining whether Client has any viable claims under the Fair Debt Collection Practices Act.
- 17. Client acknowledges that Client has read and understands all the terms contains in this Bankruptcy Retainer Agreement and that, whether written, spoken, recorded or transcribed by any other means, no other terms are made part of this Bankruptcy Retainer Agreement. Client is in agreement with the terms of this agreement and has signed on the signature lines below. Client further acknowledges that Client has received a copy of this Bankruptcy Retainer Agreement.

1- Attack

Client Signature

Client Spouse Signature

Client Printed Name

Client Spouse Printed Name

-Robert J. Tomei Jr.

United States Bankruptcy Court Northern District of Illinois

| In re | William Wyatt Hendrickson Linda Lee Hendrickson | | Case No. | | |
|-------|--|---|------------------|---------------------------|--|
| | | Debtor(s) | Chapter | 7 | |
| | | | | | |
| | VERIFI | CATION OF CREDITOR M | IATRIX | | |
| | | Number of Creditors: 30 | | | |
| | The above-named Debtor(s) here (our) knowledge. | by verifies that the list of credi | tors is true and | correct to the best of my | |
| Date: | October 31, 2016 | /s/ William Wyatt Hendrickson William Wyatt Hendrickson Signature of Debtor | n | | |
| Date: | October 31, 2016 | /s/ Linda Lee Hendrickson Linda Lee Hendrickson Signature of Debtor | | | |

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Capital One Po Box 30285 Salt Lake City, UT 84130

Chase Bank USA PO Box 15298 Wilmington, DE 19850

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columus, OH 43220

Clerk of the 19th Judicial Circuit Chancery Division 18 N County Street Waukegan, IL 60085

ComEd
3 Lincoln Center
Attn: Bkcy Group-Claims Dep't
Oakbrook Terrace, IL 60181

Comenitycapital/fe21cc Po Box 182120 Columbus, OH 43218

Consumer Portfolio Svc Attn: Bankruptcy 19500 Jamboree Rd Irvine, CA 92612

Credit Control, LLC 4710 Eisenhower Blvd. Tampa, FL 33634

DirectTV Customer Service P.O. Box 6550 Greenwood Village, CO 80155-6550 ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Foot First Podiatry Centers VPC 1601 W Wise Road Schaumburg, IL 60193-3554

Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

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IICLCR-Integatred Imaging Consultants, PLLC 44000 Garfiled Road Clinton Township, MI 48038

Infinity Healthcare Physicians SC Box 078894 Milwaukee, WI 53278-8894

Keybank NA Attn: Recovery Payment Processing 4910 Tiedeman Road Brooklyn, OH 44144

Kohls/Capital One Po Box 3120 Milwaukee, WI 53201

Lake County Treasurer 18 N County Street Waukegan, IL 60085

Macy's - Dep't Stores National Bank 701 East 60th Street Sioux Falls, SD 57104 Marc D. Engel Codilis & Associates, P.C. 15W030 North Frontage Rd, Ste. 100 Burr Ridge, IL 60527

Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

Mohs Surgery and Dermatology 820 E Terra Cotta Ave., Ste. 125 Crystal Lake, IL 60014

Nicor Gas Attn: Bankruptcy Dep't P.O. Box 549 Aurora, IL 60507

NorthShore Po box 4108 Woburn, MA 01888

Northshore Po box 4108 Woburn, MA 01888

Northwest Collectors 3601 Algonquin Rd Ste 232 Rolling Meadows, IL 60008

Patrick Schuette Jutla & Dovitz, P.C. 25 N. County Street, Ste. 2R Waukegan, IL 60085

Penn Credit Corporation 916 S 14th Street PO Box 988 Harrisburg, PA 17108-0988

Pinnacle Credit Services Po Box 640 Hopkins, MN 55343